

MINUTES
CENTRAL REGIONAL TRAUMA COORDINATING COMMITTEE
OCTOBER 20, 2008
MERCED COUNTY PUBLIC HEALTH DEPARTMENT
11:00 A.M.

MEMBERS PRESENT:

Jim Davis, M.D.	Community Regional Medical Center, Fresno
Lynn Bennink, R.N.	Community Regional Medical Center, Fresno
Cathy Farr, R.N.	Kern Medical Center, Bakersfield
Anita Schlenker, R.N.	Doctors Medical Center, Modesto
Tony Tam, M.D.	Memorial Medical Center, Modesto
Linda Diaz, R.N.	Merced County EMS Agency
Johnathan Jones, R.N.	EMS Authority
Jim Andrews, M.D.	Central California EMS Agency/Merced County EMS
Debbie Becker, R.N.	Central California EMS Agency
Steve Andriese	Mountain Valley EMS Agency
Peggy Raymer	Memorial Medical Center

I. Introductions / Call to Order

The meeting was called to order by Jim Davis at 11:17 a.m.

II. Approval of Minutes

Corrections made to the minutes. Page 3, under EMS Services, Mountain Valley EMS has Fire ALS Responders.

The correct spelling to Johnathan Jones name was noted.

The minutes from August 18, 2008 were approved with the corrections.

III. Old Business

A. Bylaws

The committee started to review the draft of the bylaws.

Article I, Section 1(Name) was approved with the understanding that Appendix A will need to be written after the membership has been approved.

Article I, Section 2 (Purpose) was approved as written.

Article II (Membership)

The committee spent most of the meeting discussing the membership of the committee. Several options were discussed and examples from other States were also discussed. The size of the membership of the committee, with a general membership and an executive committee were discussed.

The committee agreed there should be two layers, a general membership and an executive board. The general membership would meet a couple times a year. The general

membership would be divided into subcommittees which would be chaired by an executive committee member.

Examples of these subcommittees would be education, prehospital, and CQI. As issues or policies would arise they would be assigned to the subcommittees to research and develop. The product of their work would be taken to the executive committee for approval and then to the general membership to be voted on and then the executive committee would have the final decision.

The executive committee would also meet biannually in a separate meeting from the general membership to review medical cases and care.

It was also suggested to have a yearly educational meeting.

Executive Committee – 26 members

Options for membership of the executive committee were discussed and the following membership was agreed on.

Each LEMSA would have 3 positions – Administrator, Medical Director and Trauma Nurse Coordinator. 15 positions

Trauma Centers would have 2 positions – medical director and trauma nurse director. 8 positions

State EMS Authority – 1 position and would be ex-officio.

Hospital Council Representative – 1 position and would be ex-officio

Adhoc member by invite from a surrounding county - 1 position and would be ex-officio

General Membership – approximately 75 members

The general membership would consist of members from three areas – prehospital, hospital and other.

Prehospital – 12 positions

Ground ambulance (5), one from each LEMSA

Wilderness provider (2)

Air ambulance (private 2)

CHP (1)

Fire (2 – an ALS and BLS provider, one from a city department and one from county, must be from different LEMSA's)

Hospitals – 33 positions

Trauma centers (20), trauma medical director, trauma nurse director, administrator, ED representative either MD/RN

Non-trauma centers (10) - 1 center per LEMSA, ED representative (MD/RN), administrator

Specialty centers

Burn (1) MD or RN

Pediatrics (2) MD and RN

Rehab - ?

Other – 21 positions

Coroner (1)

LEMSA's (15)

HMO (2)

State EMSA (1) – ex-officio

Hospital Council (1) – ex-officio

Adhoc member (1) – ex-officio

B. Subcommittee Reports

1. Prehospital trauma treatment and triage – will report next meeting
2. Gap Analysis – will report next meeting
3. Quality of care indicators - will report next meeting

C. State Trauma Committee

Jim Davis will be the interim representative to EMSA's State Trauma Committee.

IV. Next meeting

- A. The next meeting will be December 15, 2008 at the Merced Public Health Depart. The steering committee or executive committee when approved will continue to meet every other month.

Look into having a general membership meeting next spring.

- B. Johnathan will check to see if these meetings fall under the Brown Act.